

## **Boards and Commissions Application**

Person	al Information		
Name _			
Address	S		
City		State Zip	_
Home I	Phone:	Other:	
Email A	Address:		_
Interes	sted in Serving on:		
	Beach Franchise Mediation Board	Ethics Commission	7
	Beautification Committee	Noise Control Board	1
	Board of Adjustments & Appeals	Personnel Grievance Committee	1
	Board of Election Supervisors	Pension Committee	1
	Board of Port Wardens	Planning & Zoning Commission	1
	Board of Zoning Appeals	Tow Hearing Officer	1
Are you	u a resident of the Town of Ocean City?	] Yes 🔲 No	
	a an employee of the Town of Ocean City? please state your job title, department and d		
Do you	do business with the Town of Ocean City?	If yes, please detail.  Yes No	
Are voi	a currently serving on any city boards or co	mmissions? If wes please list hoard(s) \( \subseteq \text{Ves} \)	]No

References:	
Name	Phone
Address	
Name	Phone
Address	
Name	Phone
Address	
An annual financial disclosure statement is required if you are Planning and Zoning Commission, Board of Adjustments and	
Signature	_ Date

Applications may be emailed to <a href="mailedto!ldavis@oceancitymd.gov">ldavis@oceancitymd.gov</a>, faxed to 410-289-7385 or mailed to the Mayor's Office address above, attention Boards and Commissions Coordinator.